TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	SPA #05-01	Kansas
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TI SOCIAL SECURITY ACT (MEDIC	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE February 1, 2005	
5. TYPE OF PLAN MATERIAL (Check One):		
☐ NEW STATE PLAN ☐ AMENDMENT TO BE O	CONSIDERED AS NEW PLAN	X AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		n amendment)
6. FEDERAL STATUTE/REGULATION CITATION:		30,000 60,000
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE STIPERS OR ATTACHMENT (If Applicable)	
Attachment 2.2-A, Page 23d Attachment 2.6-A, Pages 12h, 12i, 12j, 12k, & 12l	Attachment 2.2-A, Page 23d Attachment 2.6-A, Pages 12h, 12i,	12j, 12k, & 12l
10. SUBJECT OF AMENDMENT: Working Healthy Medically Improved Group		
11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	X OTHER, AS SPEC Gary J Daniels is t Designee	
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO: Gary J. Daniels, Acting Secretary Social & Rehabilitation Services	
13. TYPED NAME: Gary J. Daniels	Docking State Office Building	
14. TITLE:	915 SW Harrison, Room 651S Topeka, KS 66612-2210	
Acting Secretary of Social & Rehabilitation Services 15. DATE SUBMITTED:	10poku, 1kb 00012 2210	
February 23, 2005		
FOR REGIONAL OF		Property and the second
17. DATE RECEIVED:	18 DATE APPROVEDS	
PLAN APPROVED = ONE	COPYATTACHES	e francisco de la company en pro-
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURA OF REGIONAL OFF	
21 TYPED NAME: G. Scott	22. TITLE: Meding Associate for Midicade and Ci	Regional Admin. Nildren's Neath.
23 REMARKS:		
	sana kapa sahi kasa	
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Revision:

ATTACHMENT 2.2-A PAGE 23d OMB.:

State/Territory: KANSAS

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Citation	Groups Covered		
В.	<u>Optional</u>		s Other Than the Medically Needy (Continued)
1902(a)(10)(A) (ii)(XIII) of the Act	[]	23.	BBA Work Incentives Eligibility Group - Individuals with a disability whose net family income is below 250 percent of the Federal poverty level for a family of the size involved and who, except for earned income, meet all criteria for receiving benefits under the SSI program. See page 12c of Attachment 2.6-A.
1902(a)(10)(A) (ii)(XV) of the Act	[X]	24.	TWWIIA Basic Coverage Group - Individuals with a disability at least 16 but less than 65 years of age whose income and resources do not exceed a standard established by the State. See page 12d of Attachment 2.6-A.
1902(a)(10)(A) (ii)(XVI) of the Act	[<u>X</u>]	25.	TWWIIA Medical Improvement Group - Employed Individuals at least 16 but less than 65 years of age with a medically improved disability whose income and resources to not exceed a standard established by the State. See page 12h of Attachment 2.6-A.
			NOTE: If the State elects to cover this group, it MUST also cover the Basic Coverage Group described in no. 24 above.

Revision:

ATTACHMENT 2.6-A

PAGE 12h

		OMB.:	
	State/Territ	ory: KANSAS	
Citation	Cond	ition or Requirement	
1902(a)(10)(A) (ii)(XVI) of the Act	(iii)	Working Individuals with Disabilities - Employed Medically Improved Individuals - TWWIIA	
N/A		In determining financial eligibility for employed medically improved individuals under this provision, the following standards and methodologies are applied:	
		The agency does not apply any income or resource standard.	
		NOTE: If the above option is chosen, no further eligibility-related options should be elected.	
		X The agency applies the following income	

and/or resource standard(s):

family involved.

\$15,000.

Countable income shall not exceed 300% of the Federal Poverty Level for the size of

Countable resources shall not exceed

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ATTACHMENT 2.6-A PAGE 12i OMB.:

State/Territory: KANSAS		
Citation	Condition or Requirement	
1902(a)(10)(A) (ii)(XVI) of the Act (cont.)	Income Methodologies	
(ii)(XVI) of the flet (cont.)	In determining whether an individual meets the income standard described above, the agency uses the following methodologies.	
N/A	The income methodologies of the SSI program.	
	The agency uses methodologies for treatment of income that are more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 4 to Attachment 2.6-A.	
	X The agency uses more liberal income methodologies than the SSI program. More liberal methodologies are described in Supplement 8a to Attachment 2.6-A.	

Revision:		ATTACHMENT 2.6-A PAGE 12j OMB.:
	State/Territory: KANSAS	
Citation	Condition or Requirement	
1902(a)(10)(A) (ii)(XVI) of the Act (cont.)	Resource Methodologies	
	In determining whether the indi- standard described above, the ag- methodologies.	
N/A		
	Unless one of the following item under the authority of section 19 disregards all funds held in retirincluding private retirement accounts, and exterirement plans such as 401(k) employer pension plans. Any diretirement accounts is separately 8b to Attachment 2.6-A.	202(r)(2) of the Act, ement funds and accounts, ounts such as IRAs and imployer-sponsored plans, Keogh plans, and isregard involving
	The agency disregards fu sponsored retirement pla retirement plans.	
	in a manner other than th	ands in retirement accounts lose listed above. The pecified in Supplement 8b

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ATTACHMENT 2.6-A PAGE 12k OMB.:

State/Territory: KANSAS			
Citation	Cond	Condition or Requirement	
1902(a)(10)(A) (ii)(XVI) of the Act (cont.)		The agency does not disregard funds in retirement accounts.	
N/A	<u>X</u>	The agency uses resource methodologies in addition to any indicated above that are more liberal than those used by the SSI program. More liberal resource methodologies are described in Supplement 8b to Attachment 2.6-A.	
		The agency uses the resource methodologies of the SSI program.	
		The agency uses methodologies for treatment of resources that are more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 5 to Attachment 2.6-A.	

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ATTACHMENT 2.6-A PAGE 121 OMB.:

State/Territory: KANSAS

Citation	Condition or Requirement
1902(a)(10)(A) (ii)(XVI) and 1905(v)(2) of the Act	Definition of Employed - Employed Medically Improved Individual - TWWIIA
N/A	X The agency uses the statutory definition of "employed", i.e., earning at least the minimum wage, and working at least 40 hours per month.
	The agency uses an alternative definition of "employed" that provides for substantial and reasonable threshold criteria for hours of work, wages, or other measures. The agency's threshold criteria are described below: